

EXHIBIT 1

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Irma Lissette Ortiz Meléndez
Participant's Address: P.O. Box 318 Aguirre, P.R. 00704
Participant's Email Address: ortizlissette1122@gmail.com
Name of Counsel: _____
Address of Counsel: _____
Email Address of Counsel: _____

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 17 BK 3283-LTS

Nature of Claim: PROMESA - Ley Promesa

By: Irma Lissette Ortiz Meléndez
Signature

Irma Lissette Ortiz Meléndez
Print Name

Title (if Participant is not an individual)

1- Sept - 2021
Date

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Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

PS.

Including Spanish translations please.

Irma Lissette Ortiz Melendez

Case:17-03283-LTS Doc#:18527-1 Filed:10/17/21 Entered:10/17/21 08:41:41 Desc:
Exhibit 1 - Irma Lissette Ortiz Melendez Page 3 of 3

P.O. Box 318

Aguirre, Pto. Rico 00704

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Prime clerk LLC
Grand Central station, P.O. Box 4708
New York, N.Y. 10163-4708

10163-470808

